

AUTO CR - LOG SUMMARY #1075572

TYPE: INFO

Incident Finding / Overall Case Finding

Description of Incident	Finding	Entered By	Entered Date
	(None Entered)		

Reporting Party Information

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
NON-CPD Reporting Party Victim						M	BLK		

Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
04-JUN-2015 09:30 - 04-JUN-2015 09:30		0725	007	304 - STREET	

Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
CPD Employee	TUCKER, JAMES	20860		312 /	PO AS DETECTIVE	ON Duty	The complaining party alleges that the accused officer arrested him with no justification, handcuffed him too tightly causing a bruise on his wrist, and wrongfully charged him with aggravated assault on a police officer under RD. The complaining party further alleges that the police officer constantly harasses him for no reason.
CPD Employee	CELANI, SCOTT	2309		312 /	SERGEANT OF POLICE	ON Duty	The complaining party alleges that the accused officer arrested him with no justification, handcuffed him too tightly causing a bruise on his wrist, and wrongfully charged him with aggravated assault on a police officer under RD. The complaining party further alleges that the police officer constantly harasses him for no reason.

Other Involved Parties

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
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Involved Party Associations

Role	Rep. Party Name	Related Person	Relationship
Reporting Party Victim		CELANI, SCOTT	NO RELATIONSHIP
Reporting Party Victim		TUCKER, JAMES	NO RELATIONSHIP

Incident Details

CR Required?		Manner Incident Received?	BELL
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N	Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IAD	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Civil Suit Settled Date:	
Notify Chief Administrator?	N	Notify Chief?	
Notify Coordinator?		Notification Does Not Apply?	Y
Notification Other?	N		

Notification Comments:**Incident Category List**

Incident Category	Primary?	Initial?
03D - GROUP 03 - IMPROPER SEARCH ILLEGAL ARREST / FALSE ARREST	Y	Y
03D - GROUP 03 - IMPROPER SEARCH ILLEGAL ARREST / FALSE ARREST		N

Investigator History

Investigator	Type	Assigned Team	Assigned Date	Scheduled End Date	Investigation End Date	No. of Days
PARKER, MICHAEL	Primary	SOUTH INVESTIGATIONS SECTION	24-JUN-2015	24-JUL-2015	13-JUL-2015	19
STEHLIK, JOSEPH	Supervisor	SOUTH INVESTIGATIONS SECTION	24-JUN-2015	24-JUL-2015	13-JUL-2015	

Extension History

Name	Previous Scheduled End Date	Extended Scheduled End Date	Date Certified Letter Sent	Reason Selected	Explanation	Extension Report Date	Approved By	Approved Date	Approval Comments
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Current Allegations

Accused Name	Seq. No.	Allegation	Category	Subcategory	Finding
TUCKER, JAMES	1	It has been alleged by the reporting party victim [REDACTED] that on 04 June 2015 at 2130 hours a [REDACTED] Officer Tucker #5512 arrested him without justification and constantly harasses him for no reason.	004 GROUP 04 - ARREST/LOCKUP PROCEDURES	MISCELLANEOUS	NO AFFIDAVIT
CELANI, SCOTT	1	It has been alleged by the reporting party victim [REDACTED] that on 04 June 2015 at 2130 hours a [REDACTED] Officer Scott J. Celani #3733 arrested him without justification and constantly harasses him for no reason.	004 GROUP 04 - ARREST/LOCKUP PROCEDURES	MISCELLANEOUS	NO AFFIDAVIT

Situations (Allegation Details)

Accused Name	Alleg. No.	Situation	Victim/Offender Armed?	Weapon Types	Weapon Other	Weapon Recovered?	Deceased?
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Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
CLOSED/NO CONVERSION	13-JUL-2015 10:19	STEHLIK, JOSEPH	SERGEANT OF POLICE	121 /	
PENDING LIEUTENANT REVIEW	13-JUL-2015 10:19	STEHLIK, JOSEPH	SERGEANT OF POLICE	121 /	
PENDING INVESTIGATIVE REVIEW	13-JUL-2015 10:11	PARKER, MICHAEL	SERGEANT OF POLICE	121 /	
PENDING INVESTIGATION	24-JUN-2015 07:45	O KELLY, PATRICK	SERGEANT OF POLICE	121 /	
PENDING ASSIGN INVESTIGATOR	23-JUN-2015 11:40	DUNN, BRENDA	SERGEANT OF POLICE	121 /	
PENDING APPROVE TEAM	23-JUN-2015 10:48	WATSON, JOHN	POLICE OFFICER	121 /	
PENDING ASSIGN TEAM	16-JUN-2015 04:22	STOUTENBOROUGH, ANDREA	SUPERVISING INV COPA	113 /	Allegation does not rise to the level of excessive force. Remainder of allegations transferred to BIA for investigation.
PENDING SUPERVISOR REVIEW	16-JUN-2015 04:21	STOUTENBOROUGH, ANDREA	SUPERVISING INV COPA	113 /	
PRELIMINARY	15-JUN-2015 08:49	GOLDSTON, MICHAEL	INVESTIGATOR 3 COPA	113 /	
PRELIMINARY	10-JUN-2015 06:34	STOUTENBOROUGH, ANDREA	SUPERVISING INV COPA	113 /	Scan documents. Return file to Coord. Stoutenborough.
PENDING ASSIGN TEAM	09-JUN-2015 04:29	QUERFURTH, PATRICK	SUPERVISING INV COPA	113 /	Possible EF
PENDING SUPERVISOR REVIEW	09-JUN-2015 04:29	QUERFURTH, PATRICK	SUPERVISING INV COPA	113 /	

Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
PRELIMINARY	09-JUN-2015 04:28	QUERFURTH, PATRICK	SUPERVISING INV COPA	113 /	check
PENDING SUPERVISOR REVIEW	09-JUN-2015 04:03	SALINAS-LOPEZ, LUIS	INVESTIGATOR I COPA	113 /	
PRELIMINARY	09-JUN-2015 03:30	SALINAS-LOPEZ, LUIS	INVESTIGATOR I COPA	113 /	

Attachments

No.	Type	Related Person	No. of Pages	Narrative	Original in File	Entered By	Entered Date/Time	Status	Approve Content	Approve Inclusion
1	FACE SHEET					SALINAS-LOPEZ, LUIS	09-JUN-2015 03:30			
1	INVESTIGATION					PARKER, MICHAEL	25-JUN-2015 08:29			
2	CONFLICT CERTIFICATION					PARKER, MICHAEL	25-JUN-2015 08:29			
3	DOCUMENTS - INVESTIGATION		1	Sworn Affidavit-Non Cooperation	Y	PARKER, MICHAEL	09-JUL-2015 10:55	APPROVED		
4	DOCUMENTS - INTAKE INCIDENT		1	To/From/Subject report of IPRA Coordinator/Investigations Andrea Stoutenborough; Re: Transfer of Case to BIA.	N	GOLDSTON, MICHAEL	15-JUN-2015 08:39	APPROVED		
5	DOCUMENTS - INTAKE INCIDENT		1	To/From/Subject report of IPRA Investigator Luis Salinas #176; Re: Telephone Conversation with [REDACTED]	N	GOLDSTON, MICHAEL	15-JUN-2015 08:38	APPROVED		
6	DOCUMENTS - INTAKE INCIDENT		2	Original Case Incident Report; RD [REDACTED]	N	GOLDSTON, MICHAEL	15-JUN-2015 08:42	APPROVED		
7	DOCUMENTS - INTAKE INCIDENT		5	Arrest Report of [REDACTED] CB [REDACTED]	N	GOLDSTON, MICHAEL	15-JUN-2015 08:41	APPROVED		
8	DOCUMENTS - INTAKE INCIDENT		2	Tactical Response Report of Officer Scott Celani #3733, Unit 312.	N	GOLDSTON, MICHAEL	15-JUN-2015 08:43	APPROVED		
9	DOCUMENTS - INTAKE INCIDENT		2	Officer's Battery Report of Officer Scott Celani #3733, Unit 312.	N	GOLDSTON, MICHAEL	15-JUN-2015 08:45	APPROVED		
10	DOCUMENTS - INTAKE INCIDENT		2	Tactical Response Report of Officer James Tucker #5542, Unit 312.	N	GOLDSTON, MICHAEL	15-JUN-2015 08:46	APPROVED		
11	DOCUMENTS - INTAKE INCIDENT		2	Officer's Battery Report of Officer James Tucker #5542, Unit 312.	N	GOLDSTON, MICHAEL	15-JUN-2015 08:47	APPROVED		
12	DOCUMENTS - INTAKE INCIDENT		1	OEMC Event Query; Event [REDACTED]	N	GOLDSTON, MICHAEL	15-JUN-2015 08:48	APPROVED		
13	DOCUMENTS - INTAKE INCIDENT		1		N	GOLDSTON, MICHAEL	15-JUN-2015 08:49	APPROVED		
14	DOCUMENTS - INVESTIGATION		1	Certified Letter to Victim [REDACTED]	N	PARKER, MICHAEL	09-JUL-2015 11:14	APPROVED		
	DOCUMENTS - INVESTIGATION		4	Summary Report Digest Closing Report	Y	PARKER, MICHAEL	13-JUL-2015 10:04	APPROVED		

Review Incident

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
LIEUTENANT REVIEW		SUBMITTED	STEHLIK, JOSEPH	SERGEANT OF POLICE	121	13-JUL-2015 10:19	
SERGEANT REVIEW		SUBMITTED	STEHLIK, JOSEPH	SERGEANT OF POLICE	121	13-JUL-2015 10:19	

Review Accused

Review Type	Accused/Involved Member Name	Result Type	Reviewed By	Position	Unit	Review Date	Remarks
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Accused Finding History

Accused	Allegation	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Finding	Finding Comments
CELANI, SCOTT	1. It has been alleged by the reporting party victim, [REDACTED]	PARKER, MICHAEL	13-JUL-2015 10:11			NO AFFIDAVIT	
TUCKER, JAMES	1. It has been alleged by the reporting party victim, [REDACTED]	PARKER, MICHAEL	13-JUL-2015 10:11			NO AFFIDAVIT	

Accused Penalty History

Accused Penalty History

Accused	Reviewed By	Reviewed Date/Time	CCR?	Concur?	Penalty	Penalty Comments
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Findings

Accused Name	Allegations	Category	Concur?	Findings	Comments
TUCKER, JAMES	It has been alleged by the reporting party victim [REDACTED] that on 04 June 2015 at 2130 hours at [REDACTED] Officer Tucker #5512 arrested him without justification and constantly harasses him for no reason.	004 GROUP 04 - ARREST/LOCKUP PROCEDURES		NO AFFIDAVIT	
CELANI, SCOTT	It has been alleged by the reporting party victim [REDACTED] that on 04 June 2015 at 2130 hours at [REDACTED] Officer Scott J. Celani #3733 arrested him without justification and constantly harasses him for no reason.	004 GROUP 04 - ARREST/LOCKUP PROCEDURES		NO AFFIDAVIT	

FACE SHEET (Notification Date: 09-JUN-2015) - LOG #1075572

TYPE: INFO

Reporting Party Information

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Sex	Race	Address	Phone
NON-CPD Reporting Party Victim						M	BLK		

Incident Information

Incident From Date/Time	Address of Incident	Beat	Dist. Of Occurrence	Location Code	Location Description
04-JUN-2015 09:30 - 04-JUN-2015 09:30		0725	007	304 - STREET	

Accused Members

Role	Name	Star No.	Emp No.	UOA / UOD	Position	Status	Initial / Intake Allegation
CPD Employee	Accused	UNKNOWN,				OFF Duty	The complaining party alleges that the accused officer arrested him with no justification, handcuffed him too tightly causing a bruise on his wrist, and wrongfully charged him with aggravated assault on a police officer under [REDACTED]. The complaining party further alleges that the police officer constantly harasses him for no reason.
CPD Employee	Accused	UNKNOWN,				OFF Duty	The complaining party alleges that the accused officer arrested him with no justification, handcuffed him too tightly causing a bruise on his wrist, and wrongfully charged him with aggravated assault on a police officer under [REDACTED]. The complaining party further alleges that the police officer constantly harasses him for no reason.

Incident Details

CR Required?		Manner Incident Received?	BELL
Confidential?		Biased Language?	N
Extraordinary Occurrence?	N	Bias Based Profiling?	N
Police Shooting (U)?	N		
Motor Vehicle (V)?		Alcohol Related?	N
Non Disciplinary Intervention:	N	Pursuit Related?	N
Initial Assignment:	IAD	Violence in Workplace?	N
Notify IAD Immediately?	N	Domestic Violence?	N
EEO Complaint No.:			
Civil Suit No.:		Notify Chief?	
Notify Chief Administrator?	N	Notification Does Not Apply?	Y
Notify Coordinator?			
Notification Other?	N		

Initial Incident Category List

Initial Incident Category	Primary?
03D - GROUP 03 - IMPROPER SEARCH ILLEGAL ARREST / FALSE ARREST	Y
03D - GROUP 03 - IMPROPER SEARCH ILLEGAL ARREST / FALSE ARREST	

Assignment History

Assigned To	Assigned Team	Investigator	Assignment Date/Time	Assigned By	Reason
IAD	SOUTH INVESTIGATIONS SECTION	STEHLIK, JOSEPH (SUPERVISOR)	24-JUN-2015 07:45	O KELLY, PATRICK	
IAD	SOUTH INVESTIGATIONS SECTION	PARKER, MICHAEL (PRIMARY INV)	24-JUN-2015 07:45	O KELLY, PATRICK	
IAD	SOUTH INVESTIGATIONS SECTION	-	23-JUN-2015 10:48	WATSON, JOHN	
IAD	INTERNAL AFFAIRS DIVISION	-	09-JUN-2015 15:30	SALINAS-LOPEZ, LUIS	

Assignment History

Status History

Resulting Status	Status Date/Time	Created By	Position	UOA / UOD	Comments
CLOSED/NO CONVERSION	13-JUL-2015 10:19	STEHLIK, JOSEPH	SERGEANT OF POLICE	121 /	
PENDING LIEUTENANT REVIEW	13-JUL-2015 10:19	STEHLIK, JOSEPH	SERGEANT OF POLICE	121 /	
PENDING INVESTIGATIVE REVIEW	13-JUL-2015 10:11	PARKER, MICHAEL	SERGEANT OF POLICE	121 /	
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PRELIMINARY	09-JUN-2015 04:28	QUERFURTH, PATRICK	SUPERVISING INV COPA	113 /	check
PENDING SUPERVISOR REVIEW	09-JUN-2015 04:03	SALINAS-LOPEZ, LUIS	INVESTIGATOR I COPA	113 /	
PRELIMINARY	09-JUN-2015 03:30	SALINAS-LOPEZ, LUIS	INVESTIGATOR I COPA	113 /	

SWORN AFFIDAVIT FOR COMPLAINT LOG INVESTIGATION
CHICAGO POLICE DEPARTMENT

STATE OF ILLINOIS)

COUNTY OF COOK)

CC

Location of Incident	Date	Time
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Summary of Statement(s):

<div></div>

I, _____ hereby state as follows:

1. I have read the above summary and/or attached statement(s) in its entirety, reviewed it for accuracy and been given an opportunity to make corrections and additions to the statement(s).
2. Under penalties as provided by law pursuant to 735 ILCS 5/1-109, I certify that the information set forth in the statement(s) above and/or attached summary are true and correct, except as to any matters therein stated to be on information and belief as to such matters, I certify as aforesaid that I verily believe the same to be true.

Print Affiant's Name

Print Witness's Name

Affiant's Signature

Witness's Signature

Date

Date

CPD-44.126 (Rev. 6/09) English

Attachment No. _____

Complaint Log No. _____

INDEPENDENT POLICE REVIEW AUTHORITY

10 JUNE 2015

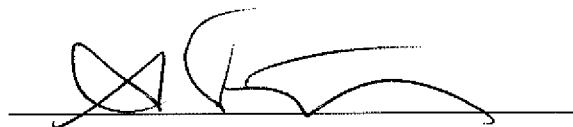
TO: Chief Juan J. Rivera
Bureau of Internal Affairs

FROM: Andrea Stoutenborough
Coordinator of Investigations
Independent Police Review Authority

SUBJECT: TRANSFER OF CASE TO THE BUREAU OF INTERNAL AFFAIRS
LOG # 1075572

Log #1075572 was registered at the Independent Police Review Authority on 09 June 2015 which included the allegation that the accused officers handcuffed the complainant too tightly.

A telephone interview was conducted with the complainant [REDACTED] and it has been determined that this allegation does not rise to the level of excessive force. The remainder of the allegations is being forwarded to the Bureau of Internal Affairs for investigation.

A handwritten signature in black ink, appearing to be 'A. Stoutenborough', written over a horizontal line.

Coordinator Andrea Stoutenborough
Independent Police Review Authority

INDEPENDENT POLICE REVIEW AUTHORITY

Date: 10 June 2015

Log # 1075572

TO: Chief Administrator
Independent Police Review Authority

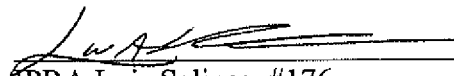
FROM: Investigator Luis Salinas, #176

SUBJECT: Telephone Conversation with [REDACTED]

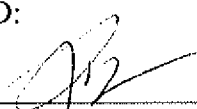
On 09 June 2015 at approximately 1515 hours [REDACTED] called IPRA to register a complaint against two unknown police officers. [REDACTED] primary allegation was that two police officers in plain clothes stopped him, arrested him, and charged him with aggravated assault towards a police officer without justification. [REDACTED] further alleged that the police officers constantly harass him by stopping and questioning him without justification. [REDACTED] also mentioned that the unknown police officers handcuffed him too tightly causing a bruise on his wrist.

[REDACTED] stated that on 04 June 2015 at approximately 2130 hours, he was involved in a verbal dispute with his child's mother when the unknown police officers drove by. [REDACTED] stated that the police officers looked at him and that he got verbally belligerent with them because he feels that the police officers constantly harass him. [REDACTED] stated that the police officers stopped and instructed him to approach but that he refused. [REDACTED] stated that the police officers arrested him without incident and transported him to District 7 for processing where he was wrongfully charged with aggravated assault towards a police officer. [REDACTED] stated that one of the police officers told him that they had fabricated the charge against him.

[REDACTED] stated that his only injury was a bruised wrist. [REDACTED] stated he did not request medical attention for the bruise on his wrist while under arrest but that he sought medical attention after he was released. [REDACTED] added that he is employed by the City of Chicago in the Department of Streets and Sanitation.


IPRA Luis Salinas, #176

APPROVED:



IPRA Supervisor

CHICAGO POLICE DEPARTMENT
ORIGINAL CASE INCIDENT REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653
(For use by Chicago Police Department Personnel Only)
CPD-11.388(6/03)-C

RD
Case #
EVENT

INCIDENT	DETECTIVE SUP. APPROVAL COMPLETE		
	IUCR: 0554 - Assault - Agg Po Hands No/Min Injury		
	Occurrence Location: [REDACTED] 304 - Street	Beat: 0725	Unit Assigned: 6769F RO Arrival Date: 04 June 2015 22:52
	Occurrence Date: 04 June 2015 22:52	# Offenders: 1	

NON-OFFENDER(S)	VICTIM - Individual		Police Officer
	Name: STATE OF ILLINOIS, P.O. Celani #3733		
	Res: 6120 S Racine Ave Chicago IL	Beat: 0713	
	Sobriety: Sober CPD Officer: Yes		

NON-OFFENDER(S)	VICTIM - Individual		Police Officer
	Name: STATE OF ILLINOIS, P.O. Tucker #5542		
	Res: 6120 S Racine Ave Chicago IL	Beat: 0713	
	Sobriety: Sober CPD Officer: Yes		

SUSPECT(S)	Suspect # 1		In Custody
	Name: [REDACTED]	Demographics	
	Res: [REDACTED] at: 0725	Male Black 5'07, 190 lbs , Brown Eyes Black Hair Short Hair Style Medium Brown Complexion	DOB: [REDACTED] Age: 24 years Birth Place: Illinois DLN: [REDACTED]
	Empl: [REDACTED] at: 0725	Scar Marks Descr: [REDACTED]	

RELATIONSHIP	STATE OF ILLINOIS, P.O. Celan (Victim)	is a No Relationship of	[REDACTED]	(Offender)
	STATE OF ILLINOIS, P.O. Tucke (Victim)	is a No Relationship of	[REDACTED]	(Offender)



Chicago Police Department - Incident Report

GANG INFO	Incident Related Info	
	(Suspect)	
	Affiliation: MEMBER	Gang Identifications: Admission
	Gang Name:	Victim/Witness Statement

OTHER PROPERTIES	Property #1		Possessor/User
	Quantity: 2	Inventory #	Used as Weapon? No
	Description: Photo Of Work Id And Proof Of Employment	Owner:	Taken/Stolen? No
	Property Type: Other		Recovered? Yes

NARRATIVES	
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PERSONNEL	Reporting Officer	Star No	Emp No	Name	User	Date	Unit	Beat
		3733		CELANI, Scott, J		05 Jun 2015 00:26	312	6769F

IUCR ASSOCS	Victim	IUCR	Crime	Offender
	STATE OF ILLINOIS	0554	Assault - Agg Po Hands No/Min Injury	
	STATE OF ILLINOIS	0554	Assault - Agg Po Hands No/Min Injury	



CHICAGO POLICE DEPARTMENT

ARREST REPORT

3510 S. Michigan Avenue, Chicago, Illinois 60653

(For use by Chicago Police Department Personnel Only)

CPD-11.420C(REV. 6/30)

FINAL APPROVAL

CB #:
IR #:
YD #:
RD #:
EVENT #:

ARREST REPORTING

OFFENDER

Name:

Res:

Beat: 725

Empl:

Beat: 122

DOB:

AGE: 24 years

POB: Illinois

DL

ARMED WITH Unarmed

Male

Black

5' 07"

190 lbs

Brown Eyes

Black Hair

Short Hair Style

Medium Brown

Complexion

Marks:

INCIDENT

Arrest Date: 04 June 2015 22:52

TRR Completed? Yes

Total No Arrested: 1

Co-Arrests

Assoc Cases

Location

Beat: 725

DCFS Ward ? No

304 - Street

Dependent Children? No

Holding Facility: District 007 Lockup

Resisted Arrest? No

CHARGES

1

Offense As Cited 720 ILCS 5.0/12-2-B-4

AGG ASSAULT PC OFFICER/VOLUNTEER

Class A - Type M

2

Offense As Cited 720 ILCS 5.0/12-2-B-4

AGG ASSAULT PC OFFICER/VOLUNTEER

Class A - Type M

Victim

State Of Illinois, P.O. Tucker
#5542State Of Illinois, P.O. Celani
#3733RECOVERED
NARCOTICS

NO NARCOTICS RECOVERED

WARRANT

NO WARRANT IDENTIFIED

ARREST REPORTING

VICTIM AND COMPLAINANT

Name: STATE OF ILLINOIS, P.O. Tucker #5542

Injured? No Deceased? No

Empl: 6120 S Racine Ave
Chicago, IL 60636
312-745-4079

Beat: 713

DOB:

Hospitalized? No

Age:

Treated and Released? No

Comments:

VICTIM AND COMPLAINANT

Name: STATE OF ILLINOIS, P.O. Celani #3733

Injured? No Deceased? No

Empl: 6120 S Racine Ave
Chicago, IL 60636
312-745-4079

Beat: 713

DOB:

Hospitalized? No

Age:

Treated and Released? No

Comments:

NON-OFFENDER(S)

ARRESTEE
VEHICLE

NO ARRESTEE VEHICLE INFORMATION ENTERED

PROPERTIES

Confiscated Properties :

All confiscated properties are recorded in the e-Track System. This system can be queried by the inventory number to retrieve all official court documents related to evidence and/or recovered properties.

PROPERTIES INFORMATION FOR [REDACTED] NOT AVAILABLE IN THE AUTOMATED ARREST SYSTEM.

INCIDENT NARRATIVE

(The facts for probable cause to arrest AND to substantiate the charges include, but are not limited to, the following)

EVENT # [REDACTED] THIS IS AN ARREST BY THE AREA SOUTH GANG ENFORCEMENT DIVISION BEATS 6769F/E IN THAT ABOVE OFFENDER WAS STANDING IN THE STREET AT ABOVE LOCATION YELLING AT A WOMAN WHO WAS SEATED INSIDE A VEHICLE WHICH WAS DOUBLE PARKED AT SAME LOCATION. SAID WOMAN WAS YELLING BACK AT SAID OFFENDER. THERE WAS ALSO A YOUNG FEMALE CHILD IN THE BACK SEAT OF SAID WOMAN'S VEHICLE. AS A/O'S WERE DRIVING PARALLEL TO SAID OFFENDER HE YELLED, "FUCK YOU MOTHERFUCKERS! LEAVE US THE FUCK ALONE!" A/O'S APPROACHED TO INVESTIGATE AND CHECK THE WELL BEING OF SAID FEMALE AND YOUNG CHILD. AS A/O'S APPROACHED OFFENDER, HE CLENCHED HIS FISTS AND STATED, "YOU TOUCH ME AND YOU BITCHES ARE DEAD!" A/O'S WERE IN FEAR OF RECEIVING A BATTERY. OFFENDER KEPT HIS FISTS CLENCHED AND TIGHTENED HIS ARMS BUT WAS PLACED INTO CUSTODY WITHOUT FURTHER INCIDENT. SAID WOMAN DROVE AWAY FROM THE SCENE WITH SAID CHILD AS A/O'S WERE ESCORTING OFFENDER INTO THEIR VEHICLE. AS A/O'S WERE TRANSPORTING OFFENDER INTO 007 FOR PROCESSING, OFFENDER WAS IRRATE SCREAMING AND VERBALLY ABUSING A/O'S BY STATING, "FUCK YOU WHITE MOTHERFUCKING PIGS! I HOPE YOU BITCHES ENJOY YOUR LAST DAY WORKING! I AM A MUNICIPAL EMPLOYEE LIKE YOU FAGGOTS! I WILL HAVE YOUR JOB, I KNOW PEOPLE! YOU MOTHERFUCKERS DESERVE WHATEVER HAPPENS TO YOU! I HATE YOU ALL!" NAME CHECK AND INV ALERTS ARE CLEAR. SELF-ADMITTED [REDACTED] GANG MEMBER. COURT:Z. BOTH A/O'S COMPLETED TRR'S AND OBR'S.

ARREST REPORTING

COURT INFO	BOND INFO
Desired Court Date: 08 July 2015 Branch: 35-2 727 E 111TH ST - Room Court Sgt Handle? No Initial Court Date: 05 June 2015 Branch: 35-2 727 E 111TH ST - Room Docket #:	BOND INFORMATION NOT AVAILABLE

REPORTING PERSONNEL	ATTESTING OFFICER:
I hereby declare and affirm, under penalty of perjury, that the facts stated herein are accurate to the best of my knowledge, information and/or belief.	
Attesting Officer: #3733 CELANI, S J	05 JUN 2015 00:24
ARRESTING OFFICER(S):	
1st Arresting Officer: #5542 TUCKER, J L	Beat 6769E
2nd Arresting Officer: #3733 CELANI, S J	6769F
APPROVING SUPERVISOR:	
Approval of Probable Cause : #1156 HINDMAN, D	05 JUN 2015 00:55

ARREST PROCESSING REPORT

Holding Facility: District 007 Lockup
Received in Lockup: 05 June 2015 01:05
Prints Taken: 05 June 2015 01:10
Palmprints Taken: Yes
Photograph Taken: 05 June 2015 01:11
Released from Lockup: 05 June 2015 12:51

Time Last Fed:
Time Called: Phone#: REFUSED
Cell #: 13
Transport Details : 2PO 6769E 04-JUN-2015 22:54

VISUAL CHECK OF ARRESTEE

Is there obvious pain or injury? No
Is there obvious signs of infection? No
Under the influence of alcohol/drugs? No
Signs of alcohol/drug withdrawal? No
Appears to be despondent? No
Appears to be irrational? No
Carrying medication? No

ARRESTEE QUESTIONNAIRE

Presently taking medication? No
(if female)are you pregnant?
First time ever been arrested? No
Attempted suicide/serious harm? No
Serious medical or mental problems? No
Are you receiving treatment? No
Transgender/intersex/gender non-conforming? No
Deaf/hard of hearing-request interpreter for court? No
Interpreter needed? (Indicate language) No

RETURN TO HOLDING FACILITY COMMENTS:

QUESTIONNAIRE REMARKS:

LOCKUP KEEPER COMMENTS:

EMERGENCY CONTACT

Name : REFUSED

Res:

Beat:

NO INTERVIEWS LOGGED

NO VISITORS LOGGED

ARREST PROCESSING REPORT

MOVEMENT LOG

MOVEMENT LOG INFORMATION NOT AVAILABLE

WC COMMENTS

Watch Commander Comments:

REL w/o CHARGING

DOES NOT APPLY TO THIS ARREST

PROCESSING PERSONNEL

ARRESTEE PROCESSING PERSONNEL:

			Beat
Searched By:	MOTLEY, O		
Lockup Keeper:	PRICE, D J		
Fingerprinted By:	MOTLEY, O		
Offender Searched By:	#5542 TUCKER, J		6769E
Rights Given By:	#5542 TUCKER, J		6769E

APPROVAL PERSONNEL:

			Beat
Final Approval of Charges :	#1156 HINDMAN, D M		05 JUN 2015 01:54

TACTICAL RESPONSE REPORT/Chicago Police Department

MEMBER INVOLVED		1. DATE OF INCIDENT 04-JUN-2015		TIME 22:52:00		2. ADDRESS OF OCCURRENCE [REDACTED]				3. LOCATION CODE 304		4. BEAT/OCCUR 0725	
		5. POSITION 9161		8. LAST NAME CELANI		7. FIRST NAME SCOTT J		8. STAR NO. 3733		9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		10. RACE CODE WHI	
SUBJECT INFORMATION		14. DATE OF APPT. 29-NOV-2004		15. EMPLOYEE NO. [REDACTED]		16. UNIT & BEAT OF ASSIGNMENT 312 6769F		17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		19. MEMBER IN UNIFORM? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No	
		20. LAST NAME [REDACTED]		21. FIRST NAME [REDACTED]		22. M.I. W		23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F		24. RACE BLK		25. O.O.B. [REDACTED]	
REASON FOR USE OF FORCE (Check all that apply)		30. WAS SUBJECT ARMED/VERBAL THREAT (ASSAULT), HANDS/FISTS <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		31. SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		32. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		33. WHERE WAS MEDICAL TREATMENT OBTAINED? [REDACTED]		34. BY WHOM? [REDACTED]		35. CONDITION <input checked="" type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid	
		36. CHARGES PLACED 720 ILCS 5.0/12-2-B-4, 720 ILCS 5.0/12-2-B-4		37. CB NO. [REDACTED]		IR NO. [REDACTED]		DNA <input type="checkbox"/>					
WEAPON DISCHARGE INCIDENT		38. PASSIVE RESISTER <input type="checkbox"/>		ACTIVE RESISTER <input type="checkbox"/>		ASSAILANT: ASSAULT <input checked="" type="checkbox"/>		ASSAILANT: BATTERY <input type="checkbox"/>		ASSAILANT: DEADLY FORCE <input type="checkbox"/>		SUBJECT'S ACTIONS	
		DID NOT FOLLOW VERBAL DIRECTION <input type="checkbox"/>		FLED <input type="checkbox"/>		IMMINENT THREAT OF BATTERY <input checked="" type="checkbox"/>		ATTACK WITH WEAPON <input type="checkbox"/>		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/>		STIFFENED (DEAD WEIGHT) <input checked="" type="checkbox"/>	
CASE INFO.		MEMBER PRESENCE <input checked="" type="checkbox"/>		OPEN HAND STRIKE <input type="checkbox"/>		ELBOW STRIKE <input type="checkbox"/>		KNEE STRIKE <input type="checkbox"/>		FIREARM <input type="checkbox"/>		MEMBER'S RESPONSE	
		VERBAL COMMANDS <input checked="" type="checkbox"/>		TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/>		CLOSED HAND STRIKE/PUNCH <input type="checkbox"/>		KICKS <input type="checkbox"/>		OTHER <input type="checkbox"/>		ESCORT HOLDS <input checked="" type="checkbox"/>	
SIGNATURES		WRISTLOCK <input type="checkbox"/>		OC CHEMICAL WEAPON <input type="checkbox"/>		IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/>		IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>		OTHER <input type="checkbox"/>		ARMBAR <input type="checkbox"/>	
		PRESSURE SENSITIVE AREAS <input type="checkbox"/>		TASER (Probe Discharge) <input type="checkbox"/>		TASER (Contact Stun) <input type="checkbox"/>		TASER (Spark Displayed) <input type="checkbox"/>		OTHER <input type="checkbox"/>		CONTROL INSTRUMENT <input type="checkbox"/>	
71. R.D. NO.		OC/CHEMICAL WEAPON AUTHORIZED BY (NAME) [REDACTED]		40. ADDITIONAL INFORMATION SUBJECT CLENCHED FISTS WHILE STATED, "IF YOU TOUCH ME, YOU BITCHES ARE DEAD!"		41. WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER		42. INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors		43. LIGHTING CONDITIONS <input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input checked="" type="checkbox"/> 05 Poor Artificial <input type="checkbox"/> 06 Good Artificial		44. WEATHER CONDITIONS CLEAR	
		POSITION [REDACTED]		STAR NO. [REDACTED]		UNIT [REDACTED]		45. MAKE/MANUFACTURER [REDACTED]		46. MODEL [REDACTED]		47. BARREL LENGTH [REDACTED]	
72.		49. TASER DART ID NO. [REDACTED]		50. WEAPON SERIAL No. (Include Letters) [REDACTED]		51. CHICAGO GUN REG. NO. [REDACTED]		52. IL FIREARM OWNER ID. NO. [REDACTED]		53. HANDGUN CERTIFICATE NO. [REDACTED]		54. SPECIAL WEAPON CERTIFICATE NO. [REDACTED]	
		55. PROPERTY INVENTORY NO. [REDACTED]		56. TYPE OF AMMUNITION USED [REDACTED]		57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER [REDACTED]		58. TOTAL NO. OF SHOTS MEMBER FIRED [REDACTED]		59. WHO FIRED FIRST SHOT <input type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (SPECIFY)		60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO	
73. REPORTING MEMBER (Print Name) CELANI, SCOTT J 05-JUN-2015 00:16:45		61. NO. OF CARTRIDGES/SHOT SHELLS RELOADED [REDACTED]		62. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST) <input type="checkbox"/> 03 OTHER (SPECIFY)		63. HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (SPECIFY)		64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD [REDACTED]		65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO		66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) [REDACTED]	
		67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT. <input type="checkbox"/> 02 05 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 16 FT.		68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBER'S WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN		69. POSITION OF MEMBER DISCHARGING WEAPON <input type="checkbox"/> 01 STANDING <input type="checkbox"/> 02 LYING DOWN <input type="checkbox"/> 03 SITTING <input type="checkbox"/> 04 KNEELING <input type="checkbox"/> 05 OTHER (SPECIFY)		70. NOTIFICATIONS (OC OR TASER INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DSS & LT./DIST. OF OCCUR. <input type="checkbox"/> CPIC		70. NOTIFICATIONS (FIREARM INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DSS/DIST. OF OCCUR. & OCIC <input type="checkbox"/> CPIC <input type="checkbox"/> DET. DIV.			
74. REVIEWING SUPERVISOR (Print Name) MAPLES JR, JOHN R 05-JUN-2015 00:42:02		73. REPORTING MEMBER (Print Name) CELANI, SCOTT J 05-JUN-2015 00:16:45		STAR/EMPLOYEE NO. 3733		SIGNATURE [REDACTED]		DATE REVIEWED 05-JUN-2015 00:42:02		TIME 05-JUN-2015 00:42:02		71. R.D. NO. [REDACTED]	
		74. REVIEWING SUPERVISOR (Print Name) MAPLES JR, JOHN R 05-JUN-2015 00:42:02		STAR NO. 1999		SIGNATURE [REDACTED]		DATE REVIEWED 05-JUN-2015 00:42:02		TIME 05-JUN-2015 00:42:02		71. R.D. NO. [REDACTED]	

LIEUTENANT OR ABOVE/OCIC REVIEW

THE ON-CALL INCIDENT COMMANDER (OCIC) WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS INVOLVING THE DISCHARGE OF A FIREARM BY A DEPARTMENT MEMBER; 2.) ALL INCIDENTS INVOLVING THE SERIOUS INJURY OR DEATH OF A MEMBER OF THE PUBLIC SUBSEQUENT TO INTERACTIONS WITH A DEPARTMENT MEMBER; 3.) ALL INCIDENTS INVOLVING THE DISCHARGE OF IMPACT MUNITIONS BY A DEPARTMENT MEMBER; 4.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 THROUGH 3.

THE ASSIGNED INVESTIGATING SUPERVISOR THE RANK OF LIEUTENANT OR ABOVE FROM THE DISTRICT OF OCCURRENCE WILL COMPLETE THE REVIEW SECTION FOR ALL OTHER INCIDENTS.

75. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☒ REFUSED

☐ INTERVIEW NOT CONDUCTED (Specify Reason)

R/LT spoke with the offender and he declined to make a statement.

76. LIEUTENANT OR ABOVE/OCIC RATIONALE FOR BOX 77 FINDING

Based upon the information available at this time, the actions of Officer Celani are found to be in compliance with the procedures and directives of the Chicago Police Department.

77. LIEUTENANT OR ABOVE/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. _____ OBTAINED

78. LIEUTENANT OR ABOVE/OCIC (Print Name)

BETZ, DAVID C

SIGNATURE

DATE COMPLETED TIME

05-JUN-2015 00:46:12

79. TOTAL TRR's THIS EVENT No.

2

OFFICER'S BATTERY REPORT
CHICAGO POLICE DEPARTMENT

RD NO. [REDACTED]

INSTRUCTIONS: This form is to be completed for all incidents when: (1) a sworn member is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while performing a police function either on-duty or off-duty, (2) a detention aide is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while in the performance of his or her duties.

"X APPLICABLE BOXES"

OFFICER INFORMATION		INCIDENT INFORMATION	
NAME (LAST - FIRST - M.I.) CELANI, SCOTT J		<input type="checkbox"/> 1. INDOOR <input checked="" type="checkbox"/> 2. OUTDOOR	
STAR NO. 3733	POSITION POLICE OFFICER	ADDRESS OF OCCURRENCE [REDACTED]	
DATE OF APPOINTMENT 29-NOV-2004	EMPLOYEE NO. [REDACTED]	STATE (If outside Chicago)	
UNIT OF ASSIGNMENT 312	BEAT/CALL NO. 6769F	LOCATION CODE 304-STREET	BEAT OF OCCURRENCE 0725
SEX <input checked="" type="checkbox"/> 1. M <input type="checkbox"/> 2. F	RACE WHITE	DOB [REDACTED]	DATE OF OCCURRENCE 04-JUN-2015
HEIGHT 600	WEIGHT 225	TIME 22:52:00	DAY OF WEEK THURSDAY
TYPE OF ASSIGNMENT WHEN BATTERY OCCURRED <input checked="" type="checkbox"/> 1. ON DUTY <input type="checkbox"/> A. UNIFORM, PATROL DUTY <input type="checkbox"/> B. UNIFORM, OTHER DUTY Describe _____ <input checked="" type="checkbox"/> C. CITIZEN'S DRESS <input type="checkbox"/> D. TACTICAL <input type="checkbox"/> E. B.I.S. UNIT <input type="checkbox"/> F. SPECIAL EMPLOYMENT <input type="checkbox"/> G. OTHER _____ <input type="checkbox"/> 2. OFF DUTY <input type="checkbox"/> 3. SPECIAL EMPLOYMENT <input type="checkbox"/> 4. SECONDARY / OTHER		NO. OF OFFICERS BATTERED <u>2</u> WERE THERE ASSISTING UNITS ON SCENE? 1. <input type="checkbox"/> YES 2. <input checked="" type="checkbox"/> NO IF YES HOW MANY ASSISTING OFFICERS WERE PRESENT AT TIME BATTERY (EXCLUDING YOU OR YOUR PARTNERS) ? _____	
		MANNER OF ATTACK <input type="checkbox"/> 01. SHOT <input type="checkbox"/> 02. SHOT AT <input type="checkbox"/> 03. STABBED/CUT (INCLUDING ACTUAL ATTEMPT) <input type="checkbox"/> 04. STRUCK/BLUNT FORCE (INCLUDING ACTUAL ATTEMPT) <input checked="" type="checkbox"/> 05. OTHER (INCLUDING VERBAL THREATS)	
TYPE OF ACTIVITY <input type="checkbox"/> A. AMBUSH - NO WARNING <input type="checkbox"/> B. TRAFFIC STOP/PURSUIT <input type="checkbox"/> C. INVESTIGATING SUSPICIOUS PERSON <input checked="" type="checkbox"/> D. DISTURBANCE - DOMESTIC <input type="checkbox"/> E. DISTURBANCE - MENTAL PATIENT <input type="checkbox"/> F. DISTURBANCE - RIOT/MOB ACTION/CIVIL DISORDER <input type="checkbox"/> G. DISTURBANCE - OTHER <input type="checkbox"/> H. MAN WITH A GUN <input type="checkbox"/> I. PURSUING/ARRESTING OFFENDER (Specify) CHARGE _____ IUCR CODE _____ <input type="checkbox"/> J. PROCESSING/TRANSPORTING/GUARDING A PRISONER (Specify) ORIGINAL CHARGE _____ ORIGINAL IUCR CODE _____ <input type="checkbox"/> K. OTHER		TYPE OF WEAPON/THREAT (Check all that apply): <input type="checkbox"/> A. FIREARM CALIBER _____ <input type="checkbox"/> 1. REVOLVER <input checked="" type="checkbox"/> D. HANDS/FISTS <input type="checkbox"/> 2. SEMI-AUTOMATIC <input type="checkbox"/> E. FEET <input type="checkbox"/> 3. RIFLE <input type="checkbox"/> F. MOUTH (SPIT, BITE, ETC.) <input type="checkbox"/> 4. SHOTGUN <input checked="" type="checkbox"/> G. VERBAL THREAT (ASSAULT) <input type="checkbox"/> H. OTHER (SPECIFY) _____ <input type="checkbox"/> B. VEHICLE <input type="checkbox"/> 1. OFFICER STRUCK WITH VEHICLE <input type="checkbox"/> 2. ATTEMPTED TO STRIKE OFFICER WITH VEHICLE <input type="checkbox"/> C. KNIFE/OTHER CUTTING INSTRUMENT <input type="checkbox"/> I. BLUNT INSTRUMENT	
		FIREARM USE INFORMATION (Check all that apply): <input type="checkbox"/> A. OFFICER AT GUNPOINT <input type="checkbox"/> B. OFFICER'S OWN WEAPON OBTAINED <input type="checkbox"/> C. ATTEMPTED TO OBTAIN OFFICER'S OWN WEAPON	
TYPE OF INJURY TO OFFICER <input type="checkbox"/> A. FATAL <input type="checkbox"/> B. NON-FATAL - MAJOR INJURY (Broken Bones/Serious Lacerations/Internal Injuries) <input type="checkbox"/> C. NON-FATAL - MINOR INJURY (Bruises/Swelling/Minor Abrasions) <input checked="" type="checkbox"/> D. NONE APPARENT/NONE		OFFENDER INFORMATION SEX: <input checked="" type="checkbox"/> 1. M <input type="checkbox"/> 2. F RACE: BLACK DOB: [REDACTED] CB NO. [REDACTED] IR NO. [REDACTED]	
		WAS THE OFFENDER'S ACTIVITY: DRUG RELATED? GANG RELATED? <input type="checkbox"/> 1. YES <input checked="" type="checkbox"/> 1. YES <input checked="" type="checkbox"/> 2. NO <input type="checkbox"/> 2. NO <input type="checkbox"/> 3. UNKNOWN <input type="checkbox"/> 3. UNKNOWN NO. OF OFFENDERS PRESENT? <u>1</u>	
LIGHTING CONDITIONS AT INCIDENT <input type="checkbox"/> A. DAYLIGHT <input type="checkbox"/> D. DUSK <input type="checkbox"/> B. NIGHT <input checked="" type="checkbox"/> E. ARTIFICIAL LIGHT <input type="checkbox"/> 1. POOR <input checked="" type="checkbox"/> 2. GOOD		WEATHER CONDITIONS <input checked="" type="checkbox"/> A. CLEAR <input type="checkbox"/> D. FOG / SMOKE / HAZE <input type="checkbox"/> G. OTHER <input type="checkbox"/> B. RAIN <input type="checkbox"/> E. SLEET / HAIL <input type="checkbox"/> C. SNOW <input type="checkbox"/> F. SEVERE CROSS WIND APPROXIMATE OUTDOOR TEMPERATURE: <u>70°F</u>	

Unusual Circumstances Regarding Officer Control Tactics and Safety: (If you need more space use additional sheets).

REPORTING MEMBER - SIGNATURE
CELANI, SCOTT J

STAR NO.
3733

WATCH COMMANDER /UNIT COMMANDING OFFICER- SIGNATURE STAR NO.
BETZ, DAVID C 779

TACTICAL RESPONSE REPORT/Chicago Police Department

1. DATE OF INCIDENT 04-JUN-2015		TIME 22:52:00		2. ADDRESS OF OCCURRENCE [REDACTED]			3. LOCATION CODE 304		4. BEAT/OCCUR 0725			
MEMBER INVOLVED	5. POSITION 9161	6. LAST NAME TUCKER	7. FIRST NAME JAMES L		8. STAR NO. 5542	9. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	10. RACE CODE WHI	11. AGE [REDACTED]	12. HT. 510	13. WT. 180		
	14. DATE OF APPT. 25-AUG-2003		15. EMPLOYEE NO. [REDACTED]		16. UNIT & BEAT OF ASSIGNMENT 312 6769E		17. DUTY STATUS <input checked="" type="checkbox"/> 01 On <input type="checkbox"/> 02 Off		18. MEMBER INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No			
SUBJECT INFORMATION	20. LAST NAME [REDACTED]		21. FIRST NAME [REDACTED]		22. M.I. W	23. SEX <input checked="" type="checkbox"/> 01 M <input type="checkbox"/> 02 F	24. RACE BLK	25. D.O.B. [REDACTED]	26. HT. 507	27. WT. 190		
	28. PHONE NO. [REDACTED]		30. WAS SUBJECT ARMED/VERBAL THREAT (ASSAULT), HANDS/FISTS <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No				31. SUBJECT INJURED? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No		32. SUBJECT ALLEGED INJURY? <input type="checkbox"/> 01 Yes <input checked="" type="checkbox"/> 02 No			
33. WHERE WAS MEDICAL TREATMENT OBTAINED? [REDACTED]		34. BY WHOM? [REDACTED]		35. CONDITION <input checked="" type="checkbox"/> 01 Apparently Normal <input type="checkbox"/> 02 Under Influence <input type="checkbox"/> 03 Hospitalized <input type="checkbox"/> 04 Not Hospitalized <input type="checkbox"/> 05 Refused Medical Aid								
36. CHARGES PLACED 720 ILCS 5.0/12-2-B-4, 720 ILCS 5.0/12-2-B-4												
37. CB NO. [REDACTED] IR NO. [REDACTED]												
REASON FOR USE OF FORCE (Check all that apply)	38. <input type="checkbox"/> DNA		PASSIVE RESISTER		ACTIVE RESISTER		ASSAILANT: ASSAULT		ASSAILANT: BATTERY		ASSAILANT: DEADLY FORCE	
	SUBJECT'S ACTIONS		MEMBER'S RESPONSE									
DID NOT FOLLOW VERBAL DIRECTION <input type="checkbox"/>		FLED <input type="checkbox"/>		IMMINENT THREAT OF BATTERY <input checked="" type="checkbox"/>		ATTACK WITH WEAPON <input type="checkbox"/>		USES FORCE LIKELY TO CAUSE DEATH OR GREAT BODILY HARM <input type="checkbox"/>				
STIFFENED (DEAD WEIGHT) <input checked="" type="checkbox"/>		PULLED AWAY <input type="checkbox"/>		OTHER <u>CLENCHED FISTS AND VE</u>		ATTACK WITHOUT WEAPON <input type="checkbox"/>		WEAPON <input type="checkbox"/>				
OTHER _____		OTHER _____		OTHER _____		OTHER _____		OTHER _____				
MEMBER PRESENCE <input checked="" type="checkbox"/>		OPEN HAND STRIKE <input type="checkbox"/>		ELBOW STRIKE <input type="checkbox"/>		KNEE STRIKE <input type="checkbox"/>		FIREARM <input type="checkbox"/>				
VERBAL COMMANDS <input checked="" type="checkbox"/>		TAKE DOWN / EMERGENCY HANDCUFFING <input type="checkbox"/>		CLOSED HAND STRIKE/PUNCH <input type="checkbox"/>		KICKS <input type="checkbox"/>		OTHER _____				
ESCORT HOLDS <input checked="" type="checkbox"/>		OC CHEMICAL WEAPON <input type="checkbox"/>		IMPACT WEAPON (Describe in Box 40) <input type="checkbox"/>		IMPACT MUNITION (Describe in Box 40) <input type="checkbox"/>						
WRISTLOCK <input type="checkbox"/>		CANINE <input type="checkbox"/>										
ARMBAR <input type="checkbox"/>		TASER (Probe Discharge) <input type="checkbox"/>										
PRESSURE SENSITIVE AREAS <input type="checkbox"/>		TASER (Contact Stun) <input type="checkbox"/>										
CONTROL INSTRUMENT <input type="checkbox"/>		TASER (Spark Displayed) <input type="checkbox"/>										
OC/CHEMICAL WEAPON W/AUTHORIZATION <input type="checkbox"/>		OTHER _____										
OTHER _____												
39. <input checked="" type="checkbox"/> DNA												
40. ADDITIONAL INFORMATION												
POSITION [REDACTED] STAR NO. [REDACTED] UNIT [REDACTED]												
41. WEAPON TYPE <input type="checkbox"/> 01 REVOLVER <input type="checkbox"/> 02 RIFLE <input type="checkbox"/> 03 SHOTGUN <input type="checkbox"/> 04 SEMI-AUTO PISTOL <input type="checkbox"/> 05 CHEMICAL WEAPON <input type="checkbox"/> 06 TASER (Probe Discharge) <input type="checkbox"/> 07 OTHER												
42. INCIDENT OCCURRED <input type="checkbox"/> Indoors <input checked="" type="checkbox"/> Outdoors												
43. LIGHTING CONDITIONS <input type="checkbox"/> 01 Daylight <input type="checkbox"/> 02 Night <input type="checkbox"/> 03 Dawn <input type="checkbox"/> 04 Dusk <input checked="" type="checkbox"/> 05 Poor Artificial <input checked="" type="checkbox"/> 06 Good Artificial												
44. WEATHER CONDITIONS CLEAR												
45. MAKE/MANUFACTURER [REDACTED] 46. MODEL [REDACTED] 47. BARREL LENGTH [REDACTED] 48. CALIBER/GAUGE [REDACTED]												
49. TASER DART ID NO. [REDACTED] 50. WEAPON SERIAL No. (include Letters) [REDACTED] 51. CHICAGO GUN REG. NO. [REDACTED] 52. IL FIREARM OWNER ID. NO. [REDACTED] 53. HANDGUN CERTIFICATE NO. [REDACTED]												
54. SPECIAL WEAPON CERTIFICATE NO. [REDACTED] 55. PROPERTY INVENTORY NO. [REDACTED] 56. TYPE OF AMMUNITION USED [REDACTED] 57. NO. OF WEAPONS DISCHARGED BY THIS MEMBER [REDACTED] 58. TOTAL NO. OF SHOTS MEMBER FIRED [REDACTED]												
59. WHO FIRED FIRST SHOT <input type="checkbox"/> 01 MEMBER <input type="checkbox"/> 02 OFFENDER <input type="checkbox"/> 03 OTHER (Specify) [REDACTED] 60. WAS FIREARM RELOADED DURING INCIDENT <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO												
61. NO OF CARTRIDGES/SHOT SHELLS RELOADED [REDACTED] 62. HOW WAS MEMBER'S HANDGUN WORN <input type="checkbox"/> 01 RT. SIDE (WAIST) <input type="checkbox"/> 02 LT. SIDE (WAIST) <input type="checkbox"/> 03 OTHER (Specify) [REDACTED]												
63. HOW WAS MEMBER'S HANDGUN DRAWN <input type="checkbox"/> 01 STRONG SIDE DRAW <input type="checkbox"/> 02 CROSS DRAW <input type="checkbox"/> 03 OTHER (Specify) [REDACTED] 64. SPECIFY METHOD/EQUIPMENT USED TO RELOAD [REDACTED] 65. DID MEMBER USE SIGHTS <input type="checkbox"/> 01 YES <input type="checkbox"/> 02 NO												
66. DESCRIBE PROTECTIVE COVER USED (LIGHT POLES, DOORWAYS, CAR, FURNITURE, ETC) [REDACTED] 67. DISTANCE BETWEEN INVOLVED MEMBER & OFFENDER WHEN FIRST SHOT WAS FIRED <input type="checkbox"/> 01 0 - 05 FT. <input type="checkbox"/> 02 05 - 10 FT. <input type="checkbox"/> 03 10 - 15 FT. <input type="checkbox"/> 04 OVER 15 FT.												
68. PERSON/OBJECT STRUCK AS RESULT OF THE DISCHARGE OF MEMBER'S WEAPON <input type="checkbox"/> 01 PERSON <input type="checkbox"/> 02 OBJECT <input type="checkbox"/> 03 BOTH <input type="checkbox"/> 04 UNKNOWN <input type="checkbox"/> 05 SITTING <input type="checkbox"/> 06 KNEELING <input type="checkbox"/> 07 OTHER (SPECIFY) [REDACTED]												
72. CASE INFO.												
NOTIFICATIONS (OC OR TASER INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DSS & LT./DIST. OF OCCUR. <input type="checkbox"/> CPIC												
NOTIFICATIONS (FIREARM INCIDENT): <input type="checkbox"/> OEMC <input type="checkbox"/> DSS/DIST. OF OCCUR & OCIC <input type="checkbox"/> CPIC <input type="checkbox"/> DET. DIV.												
Members will ensure that all required notifications and all witnesses to this use of force are documented in the appropriate case report.												
73. REPORTING MEMBER (Print Name) TUCKER, JAMES L STAR/EMPLOYEE NO. 5542 SIGNATURE [REDACTED]												
05-JUN-2015 00:07:55												
Reviewing supervisor will ensure the legibility and completeness of this report and attest by entering the required information below.												
74. REVIEWING SUPERVISOR (Print Name) MAPLES JR, JOHN R STAR NO. 1999 SIGNATURE [REDACTED] DATE REVIEWED 05-JUN-2015 00:42:25 TIME												

LIEUTENANT OR ABOVE/OCIC REVIEW

THE ON-CALL INCIDENT COMMANDER (OCIC) WILL COMPLETE THE REVIEW SECTION FOR 1.) ALL INCIDENTS INVOLVING THE DISCHARGE OF A FIREARM BY A DEPARTMENT MEMBER; 2.) ALL INCIDENTS INVOLVING THE SERIOUS INJURY OR DEATH OF A MEMBER OF THE PUBLIC SUBSEQUENT TO INTERACTIONS WITH A DEPARTMENT MEMBER; 3.) ALL INCIDENTS INVOLVING THE DISCHARGE OF IMPACT MUNITIONS BY A DEPARTMENT MEMBER; 4.) ANY LESSER USE OF FORCE BY A DEPARTMENT MEMBER WHEN THAT USE OF FORCE STEMS FROM THE SAME INCIDENT DESCRIBED HERE IN 1 THROUGH 3.

THE ASSIGNED INVESTIGATING SUPERVISOR THE RANK OF LIEUTENANT OR ABOVE FROM THE DISTRICT OF OCCURRENCE WILL COMPLETE THE REVIEW SECTION FOR ALL OTHER INCIDENTS.

76. SUBJECT'S STATEMENT REGARDING THE USE OF FORCE

☐ DNA

☒ REFUSED

☐ INTERVIEW NOT CONDUCTED (Specify Reason)

R/LT spoke with the offender and he declined to make a statement.

76. LIEUTENANT OR ABOVE/OCIC RATIONALE FOR BOX 77 FINDING

Based upon the information available at this time, the actions of Officer Tucker are found to be in compliance with the procedures and directives of the Chicago Police Department.

77. LIEUTENANT OR ABOVE/OCIC FINDING BASED UPON CURRENTLY AVAILABLE INFORMATION:

☒ I HAVE CONCLUDED THAT THE MEMBER'S ACTIONS WERE IN COMPLIANCE WITH DEPARTMENT PROCEDURES AND DIRECTIVES.

☐ I HAVE CONCLUDED THAT FURTHER INVESTIGATION IS REQUIRED.

LOG NO./CRNO. _____ OBTAINED

78. LIEUTENANT OR ABOVE/OCIC (Print Name)

BETZ, DAVID C

SIGNATURE

DATE COMPLETED

TIME

05-JUN-2015 00:46:50

79. TOTAL TRR's THIS EVENT No.

2

OFFICER'S BATTERY REPORT
CHICAGO POLICE DEPARTMENT

RD NO. [REDACTED]

INSTRUCTIONS: This form is to be completed for all incidents when: (1) a sworn member is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while performing a police function either on-duty or off-duty, (2) a detention aide is the victim of a murder, aggravated battery, battery, aggravated assault, or assault while in the performance of his or her duties.

"X APPLICABLE BOXES"

OFFICER INFORMATION		INCIDENT INFORMATION	
NAME (LAST - FIRST - M.I.) TUCKER, JAMES L		<input type="checkbox"/> 1. INDOOR <input checked="" type="checkbox"/> 2. OUTDOOR	
STAR NO. 5542	POSITION POLICE OFFICER	ADDRESS OF OCCURRENCE [REDACTED]	
DATE OF APPOINTMENT 25-AUG-2003	EMPLOYEE NO. [REDACTED]	CITY <input checked="" type="checkbox"/> CHICAGO	STATE (If outside Chicago)
UNIT OF ASSIGNMENT 312	BEAT/CALL NO. 6769E	LOCATION CODE 304-STREET	BEAT OF OCCURRENCE 0725
SEX <input checked="" type="checkbox"/> 1. M <input type="checkbox"/> 2. F	RACE WHITE	DATE OF OCCURRENCE 04-JUN-2015	TIME 22:52:00
HEIGHT 510	WEIGHT 180	DAY OF WEEK THURSDAY	
TYPE OF ASSIGNMENT WHEN BATTERY OCCURRED <input checked="" type="checkbox"/> 1. ON DUTY <input type="checkbox"/> A. UNIFORM, PATROL DUTY <input type="checkbox"/> B. UNIFORM, OTHER DUTY Describe _____ <input checked="" type="checkbox"/> C. CITIZEN'S DRESS <input type="checkbox"/> D. TACTICAL <input type="checkbox"/> E. B.I.S. UNIT <input type="checkbox"/> F. SPECIAL EMPLOYMENT <input type="checkbox"/> G. OTHER _____ <input type="checkbox"/> 2. OFF DUTY <input type="checkbox"/> 3. SPECIAL EMPLOYMENT <input type="checkbox"/> 4. SECONDARY / OTHER _____		MANNER OF ATTACK <input type="checkbox"/> 01. SHOT <input type="checkbox"/> 02. SHOT AT <input type="checkbox"/> 03. STABBED/CUT (INCLUDING ACTUAL ATTEMPT) <input type="checkbox"/> 04. STRUCK/BLUNT FORCE (INCLUDING ACTUAL ATTEMPT) <input checked="" type="checkbox"/> 05. OTHER (INCLUDING VERBAL THREATS)	
WORKING: <input type="checkbox"/> A. ALONE <input checked="" type="checkbox"/> B. WITH ONE PARTNER <input type="checkbox"/> C. WITH MULTIPLE PARTNERS How many? _____ PATROL TYPE: <input checked="" type="checkbox"/> A. SQUAD CAR <input type="checkbox"/> B. FOOT <input type="checkbox"/> C. BICYCLE <input type="checkbox"/> D. APV/MOTORCYCLE <input type="checkbox"/> E. SQUADROL <input type="checkbox"/> F. OTHER _____		TYPE OF WEAPON/THREAT (Check all that apply): <input type="checkbox"/> A. FIREARM CALIBER _____ <input type="checkbox"/> 1. REVOLVER <input type="checkbox"/> 2. SEMI-AUTOMATIC <input type="checkbox"/> 3. RIFLE <input type="checkbox"/> 4. SHOTGUN <input type="checkbox"/> B. VEHICLE <input type="checkbox"/> 1. OFFICER STRUCK WITH VEHICLE <input type="checkbox"/> 2. ATTEMPTED TO STRIKE OFFICER WITH VEHICLE <input type="checkbox"/> C. KNIFE/OTHER CUTTING INSTRUMENT <input type="checkbox"/> I. BLUNT INSTRUMENT <input checked="" type="checkbox"/> D. HANDS/FISTS <input type="checkbox"/> E. FEET <input type="checkbox"/> F. MOUTH (SPIT, BITE, ETC.) <input checked="" type="checkbox"/> G. VERBAL THREAT (ASSAULT) <input type="checkbox"/> H. OTHER (SPECIFY) _____	
TYPE OF ACTIVITY <input type="checkbox"/> A. AMBUSH - NO WARNING <input type="checkbox"/> B. TRAFFIC STOP/PURSUIT <input type="checkbox"/> C. INVESTIGATING SUSPICIOUS PERSON <input checked="" type="checkbox"/> D. DISTURBANCE - DOMESTIC <input type="checkbox"/> E. DISTURBANCE - MENTAL PATIENT <input type="checkbox"/> F. DISTURBANCE - RIOT/MOB ACTION/CIVIL DISORDER <input type="checkbox"/> G. DISTURBANCE - OTHER <input type="checkbox"/> H. MAN WITH A GUN <input type="checkbox"/> I. PURSUING/ARRESTING OFFENDER (Specify) CHARGE _____ IUCR CODE _____ <input type="checkbox"/> J. PROCESSING/TRANSPORTING/GUARDING A PRISONER (Specify) ORIGINAL CHARGE _____ ORIGINAL IUCR CODE _____ <input type="checkbox"/> K. OTHER _____		FIREARM USE INFORMATION (Check all that apply): <input type="checkbox"/> A. OFFICER AT GUNPOINT <input type="checkbox"/> B. OFFICER'S OWN WEAPON OBTAINED <input type="checkbox"/> C. ATTEMPTED TO OBTAIN OFFICER'S OWN WEAPON	
TYPE OF INJURY TO OFFICER <input type="checkbox"/> A. FATAL <input type="checkbox"/> B. NON-FATAL - MAJOR INJURY (Broken Bones/Serious Lacerations/Internal Injuries) <input type="checkbox"/> C. NON-FATAL - MINOR INJURY (Bruises/Swelling/Minor Abrasions) <input checked="" type="checkbox"/> D. NONE APPARENT/NONE		OFFENDER INFORMATION SEX <input checked="" type="checkbox"/> 1. M <input type="checkbox"/> 2. F RACE BLACK DOB [REDACTED] CB NO. [REDACTED] IR NO. _____	
LIGHTING CONDITIONS AT INCIDENT <input type="checkbox"/> A. DAYLIGHT <input type="checkbox"/> D. DUSK <input type="checkbox"/> B. NIGHT <input checked="" type="checkbox"/> E. ARTIFICIAL LIGHT <input type="checkbox"/> 1. POOR <input checked="" type="checkbox"/> 2. GOOD		WEATHER CONDITIONS <input checked="" type="checkbox"/> A. CLEAR <input type="checkbox"/> D. FOG / SMOKE / HAZE <input type="checkbox"/> G. OTHER <input type="checkbox"/> B. RAIN <input type="checkbox"/> E. SLEET / HAIL <input type="checkbox"/> C. SNOW <input type="checkbox"/> F. SEVERE CROSS WIND APPROXIMATE OUTDOOR TEMPERATURE: 70 °F	
TYPE OF OFFENDER'S ACTIVITY: <input type="checkbox"/> 1. YES <input checked="" type="checkbox"/> 2. NO <input type="checkbox"/> 3. UNKNOWN NO. OF OFFENDERS PRESENT? 1		GANG RELATED? <input checked="" type="checkbox"/> 1. YES <input type="checkbox"/> 2. NO <input type="checkbox"/> 3. UNKNOWN	

SUBJECT CLENCHED FISTS WHILE STATED, "IF YOU TOUCH ME, YOU BITCHES ARE DEAD!"

REPORTING MEMBER - SIGNATURE
TUCKER, JAMES L

STAR NO.
5542

WATCH COMMANDER /UNIT COMMANDING OFFICER- SIGNATURE STAR NO.
BETZ, DAVID C 779

CHICAGO POLICE DEPARTMENT
EVENT QUERY

10-JUN-2015 PAGE 1

Event # [REDACTED]

Type	Location	Date	Pri	DG	Svc Beat	Disp
SS	[REDACTED]	04-JUN-2015 22:54:39	3D	007		0554
Source	Response Level	Caller	Phone			
R			--			
Address of Occurrence						Occ Beat
[REDACTED]						

Event Chronology

Date	Activity	Wkstn	Person	Text
04-JUN-2015 22:54:39	SSTOP	PADM19	[REDACTED]	Type: SS
04-JUN-2015 22:54:39	DOS	PADM19	[REDACTED]	6769F
04-JUN-2015 22:54:43	CLOC	PD18	[REDACTED]	6769F [007 W/1]
04-JUN-2015 22:54:48	CLOC	PADM19	[REDACTED]	6769F [007 W/1]
04-JUN-2015 23:15:15	CASERD	AIRA	[REDACTED]	RDG Report Number [REDACTED] D/0554
			[REDACTED]	By: [REDACTED]
05-JUN-2015 01:19:40	REMINQ	PMDT5749	[REDACTED]	6769F Veh-> LIC [REDACTED] IS/IL
05-JUN-2015 03:51:07	CLEAR	PDT101	[REDACTED]	6769F
05-JUN-2015 03:51:07	CLOSE	PDT101	[REDACTED]	

Unit Summary

Unit	Dispatch	Enroute	Onscene	T	TA	TC	Clear
6769F	22:54:39	22:54:43	22:54:39				05-JUN-2015 03:51:07

1st Ave

CERTIFIED MAIL™

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

Sgt. M. Parker

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Sent To: [Redacted]
Street, or PO: [Redacted]
City, St: [Redacted]

PS Form 3800, August 2000

Sgt. M. Parker 1295
City of Chicago
Department of Police
3510 South Michigan Avenue
Chicago, Illinois 60653





Department of Police * City of Chicago
3510 South Michigan Avenue * Chicago, Illinois 60653

Date July 9, 2015

Re: C. L. No. 1075572

Dear [REDACTED]

A complaint against a Department member, registered under the above Complaint Log (C.L.) Number, is currently under investigation by the Chicago Police Department.

A vital step in the investigation is an interview with the person who registered the complaint as well as witnesses. This step is essential in order to conduct a complete and thorough investigation.

Please contact me as soon as possible so that I can make arrangements to meet with you regarding the incident under investigation. The following information is provided so that you can contact me without unnecessary inconvenience:

Name: Sergeant M. Parker #1295

Address: 3510 S. Michigan Ave

Telephone: 312-745-6310, Ext. 85069

Hours Available: 8:00am-4:00pm

Sincerely,

Sgt. Michael Parker

CPD-44.223 (REV. 4/12)

Emergency and TTY: 9-1-1 * Non-Emergency and TTY: (Within City limits) 3-1-1 * Non-Emergency and TTY: (Outside City limits) 312-746-6000

* E-mail: clearpath@chicagopolice.org * Website: www.chicagopolice.org

CPD 0288813

BUREAU OF INTERNAL AFFAIRS
Area South Investigations

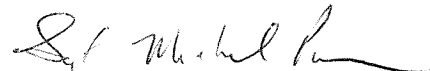
13 July 2015
Log #1075572

To: Lieutenant Greg Klichowski #386
Bureau of Internal Affairs
Area South Investigations


From: Sergeant Michael K. Parker
Bureau of Internal Affairs
Area South Investigations

Subject: Completion of Log Number 1075572

The attached Complaint Log Investigation has been completed and submitted for your approval.


Sergeant Michael K. Parker
Bureau of Internal Affairs
Area South Investigations

Approved:


Case Management Supervisor
Bureau of Internal Affairs
Area South Investigations

SUMMARY REPORT DIGEST

CHICAGO POLICE DEPARTMENT

LOG NO
1075572TYPE
INFODATE OF REPORT
13-JUL-2015

INSTRUCTIONS: To be used in all cases that are to be classified as either EXONERATED, UNFOUNDED, NOT SUSTAINED, NO AFFIDAVIT, or in SUSTAINED cases where the Disciplinary Recommendation does not exceed Five (5) DAYS SUSPENSION.

TO: DEPUTY SUPERINTENDENT, BUREAU OF PROFESSIONAL STANDARDS
ATTENTION: CHIEF, INTERNAL AFFAIRS DIVISION

FROM - INVESTIGATOR'S NAME	RANK	STAR NO	EMPLOYEE NO	UNIT ASSIGNED	UNIT DETAILED
PARKER, MICHAEL	9171	1295		121	

REFERENCE NOS. (LIST ALL RELATED C.L., C.B., I.R., INVENTORY NOS., ETC., PERTINENT OF THIS INVESTIGATION)

INCIDENT ADDRESS: 6616 S. MARSHFIELD AVE, CHICAGO, IL 60636

DATE / TIME: 04-JUN-2015 21:06

BEAT: 725

ACCUSED

NAME	RANK	STAR NO	EMP NO	UNIT ASSIGNED	UNIT DETAILED	SEX/RACE	DOB	APPOINTED DATE	ON DUTY ?	SWORN ?
TUCKER, JAMES L	9161	5542		312		M / WH		25-AUG-2003	YES	YES
CELANI, SCOTT J	9161	3733		312		M / WH		29-NOV-2004	YES	YES

REPORTING PARTY

NAME	ADDRESS*	CITY STATE	TELEPHONE	SEX / RACE	DOB / AGE
				M / BLK	/ 24

VICTIMS

NAME	ADDRESS*	CITY STATE	TELEPHONE	SEX / RACE	DOB / AGE
				M / BLK	/ 24

WITNESSES

NAME	ADDRESS*	CITY STATE	TELEPHONE	SEX / RACE	DOB / AGE
------	----------	------------	-----------	------------	-----------

* IF CPD MEMBER, LIST RANK, STAR, EMPLOYEE NOS. IN ADDRESS, PAX/BELL IN TELEPHONE BOX.

ALLEGATIONS

NOTE: Log "Type" remains classified Info-Sworn Affidavit NOT on file.

Accused: Officer James L. Tucker #5542, Unit 312

It has been alleged by the reporting party victim that on 04 June 2015 at 2130 hours at Officer Tucker #5512 arrested him without justification and constantly harasses him for no reason.

Accused: Officer Schott J. Celani #3733, Unit 312

It has been alleged by the reporting party victim that on 04 June 2015 at 2130 hours at Officer Scott J. Celani #3733 arrested him without justification and constantly harasses him for no reason.

SUMMARY

On 24 June 2015 the Reporting Sergeant received Log #1075572 as a transfer from IPRA, along with several investigative reports previously uploaded by IPRA Investigator, Luis Salinas #176. It has been alleged by victim [REDACTED] that he was arrested without justification and that he has been constantly harassed by Officers Tucker ##5542 and Celani #3733 (Attachments 4-13).

On 25 June 2015 the Reporting Sergeant contacted [REDACTED] at which time he stated that he was arrested unjustifiably. [REDACTED] also stated that whether he pursues this complaint or not is dependent upon the outcome of his court case which is on 08 July 2015 at Branch 32-2 (727 E. 11th St). [REDACTED] related that he would contact the Reporting Sergeant on 09 July 2015 to let the Reporting Sergeant know if he wanted to continue with this investigation.

As of this date [REDACTED] has not made any attempts to contact the Reporting Sergeant regarding this investigation as he had originally stated. In the absence of a signed Sworn Affidavit and without the cooperation from the reporting party [REDACTED] this investigation cannot continue. It is, therefore, requested that this case be **CLOSED NO CONVERSION**.

ATTACHMENTS

INVESTIGATIVE REPORTS - SUPPORTING ALLEGATIONS LIST ATTACHMENTS NUMBER	INVESTIGATIVE REPORTS - SUPPORTING ACCUSED MEMBERS(S) LIST ATTACHMENTS NUMBER:	PHYSICAL EVIDENCE LIST ATTACHMENTS NUMBERS:	TOTAL NUMBER OF ATTACHMENTS SUBMITTED WITH THIS FILE:
0	0	0	14

FINDINGS - RECOMMENDATIONS

Accused: Officer James L. Tucker #5542, Unit 312

FINDINGS: Allegation: No Sworn Affidavit

RECOMMENDATIONS: None, Case be closed

Accused: Officer Schott J. Celani #3733, Unit 312

FINDINGS: Allegation: No Sworn Affidavit

RECOMMENDATIONS: None, Case be closed

DATE INITIATED
(Date incident was received for investigation)

24-JUN-2015

DATE COMPLETED (Date of this report)

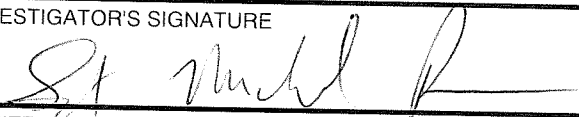
13-JUL-2015

ELAPSED TIME
(Total time expressed in days)

19

Investigator will initiate the Command Channel Review form by
completing the Investigator's Section.

INVESTIGATOR'S SIGNATURE



IF NECESSARY, USE AN 8 1/2 x 11" SHEET OF WHITE PAPER TO CONTINUE ANY ITEM.

Summary Report Digest

Attachment List

CL-1075572

No.	Type	No. of Pages	Narrative	Entered By
1	FACE SHEET			SALINAS-LOPEZ, LUIS
2	CONFLICT CERTIFICATION			PARKER, MICHAEL
3	REPORT (OTHER)	1	Sworn Affidavit-Non Cooperation	PARKER, MICHAEL
4	TO/FROM REPORT	1	To/From/Subject report of IPRA Coordinator/Investigations Andrea Stoutenborough; Re: Transfer of Case to BIA.	GOLDSTON, MICHAEL
5	TO/FROM REPORT	1	To/From/Subject report of IPRA Investigator Luis Salinas #176; Re: Telephone Conversation with [REDACTED]	GOLDSTON, MICHAEL
6	GENERAL OFFENSE CASE REPORT	2	Original Case Incident Report; RD [REDACTED]	GOLDSTON, MICHAEL
7	ARREST REPORT	5	Arrest Report of Corey Staples; CE [REDACTED]	GOLDSTON, MICHAEL
8	TACTICAL RESPONSE REPORT (TRR)	2	Tactical Response Report of Officer Scott Celani #3733, Unit 312.	GOLDSTON, MICHAEL
9	OFFICERS BATTERY REPORT	2	Officer's Battery Report of Officer Scott Celani #3733, Unit 312.	GOLDSTON, MICHAEL
10	TACTICAL RESPONSE REPORT (TRR)	2	Tactical Response Report of Officer James Tucker #5542, Unit 312.	GOLDSTON, MICHAEL
11	OFFICERS BATTERY REPORT	2	Officer's Battery Report of Officer James Tucker #5542, Unit 312.	GOLDSTON, MICHAEL
12	OEMC EVENT QUERY	1	OEMC Event Query; Even [REDACTED]	GOLDSTON, MICHAEL
13	INVESTIGATOR CASE LOG	1		GOLDSTON, MICHAEL
14	LETTER TO VICTIM	1	Certified Letter to Victim [REDACTED]	PARKER, MICHAEL
	LETTER TO VICTIM	2	Certified Letter to Victim	PARKER, MICHAEL